

This is an official

DHEC Health Advisory

Distributed via Health Alert Network
1 Nov 05, 9:10am

Seasonal Influenza Surveillance

This advisory is meant to provide the healthcare professional with the latest information on influenza surveillance including: Mandatory travel history information from patients with flu-like illness, influenza laboratory testing, personal behavioral risk reduction methods.

Mandatory Travel History Information from Flu Like Illness Patients

The medical community needs to maintain vigilance in the clinical setting and consistently obtain international travel history to determine if travel occurred to a country where influenza A H5N1 has been documented in humans or poultry; and other specific high risk exposure information for persons with fever and one or more of the following:

- Cough, sore throat, shortness of breath, AND
- History of contact with well appearing or dead poultry, including chicken and ducks (e.g., visited a poultry farm, a household raising poultry, or a bird market) or a known or suspected human case of influenza A (H5N1) in an H5N1-documented country within 10 days of symptom onset.

If any patient satisfies the above criteria, immediate consultation with your local health department is required for coordination of laboratory testing and guidance. Local health department contact information is at the end of this document.

DHEC Preferred Influenza Laboratory Testing Practices

Serological Influenza Testing is NOT Recommended for Surveillance Purposes

DHEC discourages serological influenza testing for antibodies. To indicate a likely recent influenza infection serological testing requires both an acute and convalescent specimen, demonstrating a four-fold increase in antibody titer. The initial specimen needs to be collected with the first week of symptoms and the convalescent specimen needs to be collected 2-4 weeks after the initial specimen. The protracted time delay of this serological testing method, does not allow for timeliness in laboratory results, clinical management or public health surveillance.

Positive Rapid Antigen Testing and Surveillance

Commercial rapid diagnostic test kits most commonly use a nasopharyngeal (NP) swab specimen, results are completed in office in approximately 30 minutes and indicate the presence of influenza virus as well as serological typing of A, B or A and B, depending on the brand of rapid antigen testing kit used. Some of these kits are approved for use in any outpatient setting. DHEC is requiring weekly submission worksheets by fax of positive rapid antigen test results at the end of every week to the local health department. The information on the worksheet should include:

- The date of the reporting week (e.g. November 7-10)

- Practice name
- The county where the practice is located
- Number of positive rapid influenza tests by facility/practice, and
- Type(s) of influenza being identified by the kit used (influenza A, influenza B or A and B) during the reporting period, are required to be reported.

A copy of the weekly worksheet is provided at the end of this document or can be obtained from your local health department. The contact information for your local health department is at the end of this document.

Participation in the Influenza-Like Illness (ILI) Sentinel Providers Network

Volunteer healthcare providers in South Carolina submit weekly to the CDC reports of the total number of patients seen and the subset number of those patients with influenza-like illness (ILI) by age group. ILI cases are counted if there is no other known cause for the illness. For the ILI Sentinel Provider Network, ILI is defined as fever (temperature of $>100^{\circ}\text{F}$) plus either a cough or a sore throat. If no ILI cases are seen in a week, please submit zeros for the various age groups and the total number of patients seen that week.

No influenza culture is required for counting cases of ILI. If ILI Sentinel Providers obtain positive rapid antigen tests or influenza cultures, please submit those results to by faxed work sheets (for rapid tests) or on 1129 cards or by phone to the local health department. Only submit ILI information to CDC. Providers interested in participating in this voluntary program can obtain additional information by contacting their local health department. Please see below for contact numbers of regional health departments.

DHEC's Role in Verifying Influenza Strains in the Community

As always, DHEC will continue to provide influenza culture media to ILI Sentinel Provider practices to detect influenza strains circulating in the community and upon request to document outbreaks in institutional settings.

Health care providers should consult immediately with their regional health department epidemiology office regarding submission of culture specimens of patients at risk for influenza A H5N1. DHEC staff will coordinate decision making for specimen processing by either the state or federal laboratory.

As of October 31, 2005, the official influenza activity in South Carolina is 'No Activity'. Official Influenza Activity will be documented once the DHEC Bureau of Laboratories has confirmed its first influenza viral isolate.

Annual Influenza Laboratory Surveillance Network

The annual influenza culture laboratory surveillance period will be the same as last year from October, 2005 through April, 2006. The DHEC Bureau of Labs will continue to provide influenza culture testing kits to providers and laboratories that are already enrolled in the laboratory surveillance network. If you would like to participate in the influenza culture laboratory surveillance network, please contact Virology Section-Bureau of Labs, at 803-896-0913.

How To Protect Yourself and Your Patients Against the Flu

Steps health care providers can take to keep themselves and others healthy this flu season include:

- Getting their flu shot for the regular flu season;
- Covering coughs with their arm or tissue,

- Staying home from work or school when sick with cough illness; and
- Washing hands after coughing or touching respiratory secretions.

Thank you for your continued efforts and interest in the public health of South Carolinians.

Resource Links

CDC Respiratory Hygiene/Cough Etiquette in Healthcare Settings:

- www.cdc.gov/flu/professionals/infectioncontrol/resphgiene.htm

CDC Guideline for Isolation Precautions in Hospitals:

- www.cdc.gov/ncidod/hip/ISOLAT/Isolat.htm

DHEC Influenza Surveillance Website:

- <http://www.scdhec.gov/health/disease/acute/flu.htm>

DHEC Contact Information for Reportable Diseases and Reporting Requirements

Reporting of outbreaks/clusters of cases is consistent with South Carolina Law requiring the reporting of diseases and conditions to your state or local public health department. (State Law # 44-29-10 and Regulation # 61-20) as per the DHEC 2004 List of Reportable Conditions available at: http://www.scdhec.gov/health/disease/docs/reportable_conditions.pdf

Federal HIPAA legislation allows disclosure of protected health information, without consent of the individual, to public health authorities to collect and receive such information for the purpose of preventing or controlling disease. (HIPAA 45 CFR §164.512).

Weekly worksheet for the reporting of positive rapid influenza test results



Guidance for use of this worksheet:

1. This does not take the place of reporting positive influenza viral culture results, which are still reportable using the DHEC 1129 Cards.
2. Fax or email this information **NO LATER THAN NOON ON THE MONDAY OF THE FOLLOWING WEEK** to the District-specific Health Department. These contact numbers for District-specific Health Departments are located below and also available at: http://www.scdhec.com/hs/diseasecont/docs/2004SC_ReportableDiseases.pdf
3. This worksheet is offered as an alternative to submitting patient-specific 2005 SC Department of Health and Environmental Control Disease Reporting Cards (DHEC 1129 cards) when reporting Influenza, positive rapid test results.
4. Facilities using this worksheet are required to enter the:
 - a) Reporting period (week beginning on Sunday),
 - b) Facility/Practice name,
 - c) County in which the facility/practice resides, and
 - d) Influenza type being identified (e.g. Influenza A, Influenza B, Influenza A/B, or unknown).
5. If methodologies change such that a different influenza type is being identified during the influenza season, please update the "type of influenza being identified" section of this worksheet prior to weekly submission.

For the week beginning _____ (Sunday – Saturday)

Reporting Facility/Practice: _____

County: _____

Type of influenza (A, B, A or B, or unknown) being identified via test methodology: _____

	Positive for Influenza A	Positive for Influenza B	Positive for Influenza A or B
Sunday			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Weekly Totals			

Regional Public Health Offices

Mail or call reports to the Epidemiology Office in each Public Health Region.

Region 1

(Anderson, Oconee)

220 McGee Road
Anderson, SC 29625
Phone: (864) 231-1966
Fax: (864) 260-5623
Nights / Weekends: 1-866-298-4442

(Abbeville, Edgefield, Greenwood, Laurens, McCormick, Saluda)

1736 S. Main Street
Greenwood, SC 29646
Phone: 1-888-218-5475
Fax: (864) 942-3690
Nights / Weekends: 1-800-420-1915

Region 2

(Greenville, Pickens)

PO Box 2507
200 University Ridge
Greenville, SC 29602-2507
Phone: (864) 282-4139
Fax: (864) 282-4373
Nights / Weekends: (864) 460-5355 or
1-800-993-1186

(Cherokee, Spartanburg, Union)

PO Box 4217
151 E. Wood Street
Spartanburg, SC 29305-4217
Phone: (864) 596-2227 ext. 210
Fax: (864) 596-3443
Nights / Weekends: (864) 809-3825

Region 3

(Chester, Lancaster, York)

PO Box 817
1833 Pageland Highway
Lancaster, SC 29721
Phone: (803) 286-9948
Fax: (803) 286-5418
Nights / Weekends: 1-866-867-3886 or
1-888-739-0748

(Fairfield, Lexington, Newberry, Richland)

2000 Hampton Street
Columbia, SC 29204
Phone: (803) 576-2749
Fax: (803) 576-2993
Nights / Weekends: (803) 304-4252

Region 4

(Clarendon, Kershaw, Lee, Sumter)

PO Box 1628
105 North Magnolia Street
Sumter, SC 29150
Phone: (803) 773-5511
Fax: (803) 773-6366
Nights/Weekends: 1-877-831-4647

(Chesterfield, Darlington, Dillon, Florence, Marlboro, Marion)

145 E. Cheves Street
Florence, SC 29506
Phone: (843) 661-4830
Fax: (843) 661-4859
Nights / Weekends: (843) 660-8145

Region 5

(Bamberg, Calhoun, Orangeburg)

PO Box 1126
1550 Carolina Avenue
Orangeburg, SC 29116
Phone: (803) 533-7199
Fax: (803) 536-9118
Nights / Weekends: (803) 954-8513

Region 5 (cont)

(Aiken, Allendale, Barnwell)

1680 Richland Avenue, W. Suite 40
Aiken, SC 29801
Phone: (803) 642-1618
Fax: (803) 643-8386
Nights / Weekends: (803) 827-8668 or
1-800-614-1519

Region 6

(Georgetown, Horry, Williamsburg)

2830 Oak Street
Conway, SC 29526-4560
Phone: (843) 365-3126
Fax: (843) 365-3153
Nights / Weekends: (843) 381-6710

Region 7

(Berkeley, Charleston, Dorchester)

4050 Bridge View Drive, Suite 600
N. Charleston, SC 29405
Phone: (843) 746-3806
Fax: (843) 746-3851
Nights / Weekends: (843) 219-8470

Region 8

(Beaufort, Colleton, Hampton, Jasper)

219 S. Lemacks Street
Walterboro, SC 29488
Phone: (843) 525-7603
Fax: (843) 549-6845
Nights / Weekends: 1-800-614-4698

Bureau of Disease Control

Acute Disease Epidemiology Division

1751 Calhoun Street
Box 101106
Columbia, SC
Phone: (803) 898-0861
Fax: (803) 898-0897
Nights / Weekends: 1-888-847-0902

Categories of Health Alert messages:

Health Alert: conveys the highest level of importance; warrants immediate action or attention.

Health Advisory: provides important information for a specific incident or situation; may not require immediate action.

Health Update: provides updated information regarding an incident or situation; unlikely to require immediate action.